

Member Guide

PCN

Primary Care Network

1-888-222-2542 www.health.utah.gov/pcn

Co-Pay Summary

This is only a summary of PCN services and co-pay amounts. Plan restrictions may apply. The maximum co-pays you will be required to pay (out-of-pocket) is no more than \$1,000 per person/per year. (American Indians/Alaska Natives do not have a co-pay when getting services at Indian Health Services or tribal facilities.)

Services*

Co-Pay Amount

Visits to primary care provider	\$5 per visit
Prescriptions (Limit: 4 per month)	\$5 for generic and OTC (over-the-counter) 25% of allowed amount for brand name
Dental exams, cleanings, fillings, routine x-rays, tooth extractions	10% of allowed amount
Immunizations	\$5
Eye exam (one exam per year)*	\$5
Laboratory services	5% of allowed amount if over \$50
X-rays	5% of allowed amount if over \$100
Medical equipment and supplies	10% for covered services over \$50
Emergency room visits (Restrictions apply. Not all emergencies are covered. See page 17.)	\$30 per visit
Ambulance ride	\$0
Birth Control	\$5

*Services that are not covered include: prescription eyeglasses, contact lenses, MRI's, CT Scans, DEXA Scans, outpatient hospital services, specialty care, pregnancy related services, mental health services, occupational therapy, physical therapy and chiropractic services. See the PCN Member Guide for details.



Member Guide

Covered Services for PCN Members

1-888-222-2542

www.health.utah.gov/pcn

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Utah Department of Health

May 2008

Name: _____

Client ID Number: _____

PCN Case Number: _____

Eligibility Worker: _____

Primary Care Provider: _____

Pharmacy: _____

Dentist: _____

Medicaid Information Line: 801-538-6155 or 1-800-662-9651
(for questions about covered services)

Health Resource Line: 1-888-222-2542 or www.health.utah.gov/pcn/Providers.htm
(for questions about providers, dentists, or clinics)

Table of Contents

Co-Pay Summary.....inside front cover

Introduction.....1

Welcome	2
Summary of Covered Services	3
Interpretive Services	4
Your Rights	4
HIPAA (Privacy Act)	4

Getting Started.....7

Primary Care Provider	8
Finding a Provider or Dentist	8
Out-of-Pocket Maximum	9
Your PCN Card	9
Enrollment Review	10
Reporting Changes	10

Covered Services.....11

Basic Services

Visits to a Primary Care Provider	12
Dental Services	12
Prescriptions	13
Immunizations	13
Screenings	14
Eye Exam	14
Lab Services and X-Rays	14

Additional Services

Diabetes Products	15
Birth Control	16
Medical Equipment & Supplies	16

Emergency Care

Ambulance and Emergency Room Visits	17
-------------------------------------	----

**Inpatient Hospital &
Specialty Care19**

Inpatient Hospital & Specialty Care	20
Inpatient Hospital Contact Information	22

Resources A-Z27

Notice of Privacy Rights.....30

INTRODUCTION

This section explains the Primary Care Network (PCN) program and the purpose of the Member Guide.



Welcome

Welcome to the Primary Care Network (PCN). PCN is a health plan offered by the Utah Department of Health. Most services you receive from a primary care provider in his/her office during regular business hours are covered. While on PCN, you can get services from a primary care provider that accepts PCN. Services include regular doctor visits, screenings, up to four prescriptions a month, dental services, etc. PCN is somewhat different from other health plans you may have had in the past. It focuses on preventive care and keeping you healthy.

Keep this guide. The Member Guide was designed to help you know which services are covered by your health plan and which ones are not. Keep the Member Guide in a place where you can easily find it. It will help you understand the PCN services that are offered.

The Member Guide is also available online at www.health.utah.gov/pcn. If you need another copy of the guide, you may download the pages from the website or ask your eligibility worker for an extra copy.

Disclaimer. The information in this Member Guide may change without notice. This guide contains a brief description of coverage and is not a policy, coverage or service agreement. An in-depth description of coverage is available in the PCN Provider Manual online. This is found at www.health.utah.gov/medicaid/tree in the folder named “Primary Care Network (PCN)”.

Member Guide
health.utah.gov/pcn

Provider Manual
[health.utah.gov/
medicaid/tree](http://health.utah.gov/medicaid/tree)

Summary of Covered Services

PCN covers most services given by a primary care provider. You will have co-pays for these services. (American Indians/Alaska Natives do not have a co-pay when getting services at Indian Health Services or tribal facilities.) PCN covers:

- Visits to a primary care provider
- Four prescriptions per month
- Dental exams, cleanings, fillings, x-rays and extractions
- Immunizations
- Screenings (not all screenings are covered)
- Eye exam (one exam per year), no glasses or contacts
- Routine lab services and x-rays
- Emergency room visits (restrictions apply)
- Ambulance ride
- Diabetes products
- Birth control
- Medical equipment and supplies

Not all screenings and services are covered. Services that are **not** covered include: eyeglasses, contact lenses, MRI's, CT Scans, DEXA Scans, outpatient hospital services, inpatient hospital, specialty care, pregnancy related services, mental health services, occupational therapy, physical therapy, chiropractic services and urgent care clinic services (like InstaCare). Not all emergencies are covered.

More Information. Call 1-800-662-9651 (Medicaid Information Line) to learn more about which services PCN covers. See page 8 to learn how to find a primary care provider or dentist near you.

Covered Services

see page 11

Medicaid Info. Line
1-800-662-9651

Linguistica Intl.
801-262-4550

HIPAA Privacy Act
health.utah.gov/hipaa

Interpretive Services

If you are deaf or hearing impaired, or if you speak another language, your provider may get an interpreter for you. Your provider must use a service that has a contract with Medicaid. Your provider may call the Medicaid Information Line for more information or call Linguistica International for translation services.

Your Rights

You have the right to medical care regardless of your race, nationality, disability, sex, religion, color or age. If your PCN enrollment has been denied and you feel it is unjust, you have the right to:

- Talk to your eligibility worker
- Talk to your eligibility worker's supervisor
- Request a fair hearing with a Hearing Officer
- Bring your own legal representation to the fair hearing

In addition to those rights, you also have the right to privacy as described in the Health Insurance Portability and Accountability Act (HIPAA).

Health Insurance Portability and Accountability Act (HIPAA)

Reference: CMS HIPAA Security Series

The HIPAA Privacy Act describes how medical information about you may be used and disclosed and how you may get the information. The Utah Department of Health, Division of Health Care Financing (DHCF) is committed to protecting your medical information, provide this notice to you, and abide by the terms of the notice.

Confidentiality Practices and Uses. DHCF may use your health information to:

- Approve or deny your medical treatment.
- Determine your eligibility in the PCN program in order to make payment to your health care provider.
- Evaluate the performance of a health plan or a health care provider.

Your Individual Rights. You have the right to:

- Request restrictions on how we use and share your health information.
- Request that we use a specific telephone number or address to communicate with you.
- Inspect and copy your health information, including medical and billing records. Fees may apply. Under limited circumstances, we may deny you access to a portion of your health information and you may request a review of the denial (written request only).
- Request corrections or additions to your health information. Request must be made in writing. Contact the DHCF Privacy Officer (see page 6) for the appropriate form for your request.
- Request an accounting of certain disclosures of your health information made by us (written request only).

Sharing Your Health Information. There are limited situations when we are permitted or required to disclose health information without your signed authorization. These situations include activities necessary to administer the PCN program and the following:

- For public health purposes such as reporting communicable diseases, work-related illnesses, or other diseases and injuries permitted by law; reporting births and deaths; and reporting reactions to drugs and problems with medical devices.
- To protect victims of abuse, neglect or domestic violence.
- For health oversight activities such as investigations, audits and inspections.

(continued)

- When otherwise required by law.
- When requested by law enforcement as required by law or court order.
- To coroners, medical examiners and funeral directors
- For organ and tissue donation.
- For research approved by our review under strict federal guidelines.
- To reduce or prevent a serious threat to public health and safety.
- For workers' compensation or other similar programs if you are injured at work.
- For specialized government functions such as intelligence and national security.
- All other uses and disclosures, not described in this notice, require your signed authorization. You may revoke your authorization at any time with a written statement.

Our Privacy Responsibilities. DHCF is required by law to:

- Maintain the privacy of your health information.
- Provide this notice to you.
- Follow the terms of the notice currently in effect.

We reserve the right to make changes to this notice at any time and make the new privacy effective for all information we maintain. Current notices will be posted in DHCF offices and online at health.utah.gov/hipaa. You may also request a copy of any notice from your DHCF Privacy Officer listed below.

Contact Us. For more information about your privacy rights, contact:

Craig Devashrayee, DHCF Privacy Officer
P.O. Box 143102
SLC, UT 84114-3102
801-538-6641
cdevashrayee@utah.gov

Reference: health.utah.gov/hipaa

PCN Member Guide

GETTING STARTED

This section explains what you need to know about being a PCN member.



Visits to Provider

\$5 co-pay

Find a Provider or Dentist

1-888-222-2542

[www.health.utah.gov/
pcn/find.html](http://www.health.utah.gov/pcn/find.html)

Primary Care Provider

We recommend that you have a primary care provider. This is your “main” or “family” doctor you would see on a regular basis if you were sick, needed medical advice or a routine exam. (Pregnancy related services are not covered.)

Types of primary care providers. The following types of primary care providers are covered by PCN:

- Family Practitioner
- General Practitioner
- Internal Medicine
- Nurse Practitioner
- Pediatrician (for adults)
- Physician’s Assistant

Other providers. The following providers may also give covered services:

- Dentist - cleanings, fillings, etc.
- Obstetrician/Gynecologist - annual exams
- Optometrist - eye exam
- Diabetes Educator

Finding a Provider or Dentist

If you already have a primary care provider or dentist, ask if he or she accepts PCN. Otherwise, you may choose one from the PCN Provider List. The most current list is online. The options below will help you find clinics, providers and dentists near you.

- Visit <http://www.health.utah.gov/pcn/find.html> (most current)
- Call 1-888-222-2542 (Health Resource Line)
- Find a provider or dentist in the phone book, and ask if he or she accepts PCN

Out-of-Pocket Maximum

You will not have to pay more than \$1,000 in co-pays for covered services each year. From January to December, PCN tracks when you reach the \$1,000 out-of-pocket maximum. Once you reach the maximum, PCN will cover all the rest of your co-pays. You must pay for services not covered by PCN. Those expenses do not count toward the maximum out-of-pocket amount.

Your PCN Card

Every month, PCN will mail a Primary Care Network Identification Card to you. It is a white page with a yellow background. Save it and please do the following:

1. Make sure your information is correct
2. Show the card each time you get medical care
3. Save old cards for at least one year
4. If you don't get a PCN Card, or it is lost or destroyed, call your eligibility worker

PCN Card

It is a white page (letter size) with a yellow background and looks like this.

HCH HEALTH-BUREAU OF ELIG SERVICES 00673458 PC
660 S 200 E 200507 20050624
ROOM #440 YEL 1
SALT LAKE CITY UT 84111-3854

JOHN A. DOE
123 NORTH STREET
CITYVILLE, UT 12345

PRIMARY CARE NETWORK IDENTIFICATION CARD
UTAH DEPARTMENT OF HEALTH

ELIGIBLE FROM - JULY 1, 2005 THRU JULY 31, 2005

THIS CARD ENTITLES THE FOLLOWING NAMED PERSON(S) TO PRIMARY CARE/PHARMACY SERVICES/BASIC DENTAL SERVICES. THIS PROGRAM DOES NOT PROVIDE INPATIENT HOSPITAL CARE OR SPECIALTY CARE

PCN	PCN	PCN	PCN	PCN	PCN
NAME	ID	SEX	DOB	AGE	PRIMARY CARE NETWORK
DOE, JOHN A.	0123456789	M	02/29/71	35	A PARTICIPATING PROVIDER
					DENTAL
					A PARTICIPATING DENTIST

COPY REQUIRED: PRIMARY CARE SERVICES, DENTAL, PHARMACY, AND ER

CLIENT: PRESENT THIS CARD BEFORE RECEIVING PRIMARY CARE SERVICES. PLEASE KEEP THIS CARD FOR YOUR RECORDS. IF YOU HAVE QUESTIONS ABOUT THE USE OF THIS CARD OR QUESTIONS ABOUT THE SERVICES THIS PRIMARY CARE PROGRAM PROVIDES, PLEASE CALL MEDICAID INFORMATION AT 833-6155 OR TOLL FREE 1-800-862-9851. ANY ATTEMPT TO MODIFY THIS CARD IN ANY WAY OR ALLOW USE BY UNAUTHORIZED PERSONS CONSTITUTES FRAUD.

PROVIDER: IF THIS PATIENT HAS MEDICAL INSURANCE COVERAGE INCLUDING MEDICARE, THE PATIENT IS NOT ELIGIBLE FOR THE PRIMARY CARE NETWORK PROGRAM. IF THERE ARE ANY CHANGES ON INSURANCE COVERAGE, CALL THE TOL-LIN AT 833-8620. THIS IS THE END OF THE PCN IDENTIFICATION CARD *****

Department of Health

Enrollment Fee
\$50 or less

Enrollment Review

PCN reviews your enrollment every twelve months from the time you started. At that time, PCN will send you a renewal form. Fill out the form and return it to your eligibility worker. If you are still eligible, you will need to pay the enrollment fee to get covered for another twelve months. The enrollment fee is \$15, \$25 or \$50 depending on your income and situation.

If you change your address and/or phone number, you need to report this change to your eligibility worker. This will make sure that you get the renewal form in time and sent to the correct address.

If your case is closed for more than a month, it cannot be re-opened. If this happens, you may need to wait until the next open enrollment to apply again for PCN. Call your eligibility worker if you have more questions about enrollment and eligibility.

Reporting Changes

You must report any changes in your information or status. Call your eligibility worker if you:

- Get health insurance through another source
- Move to a new address
- Get a new phone number
- Become a full-time student
- Become pregnant

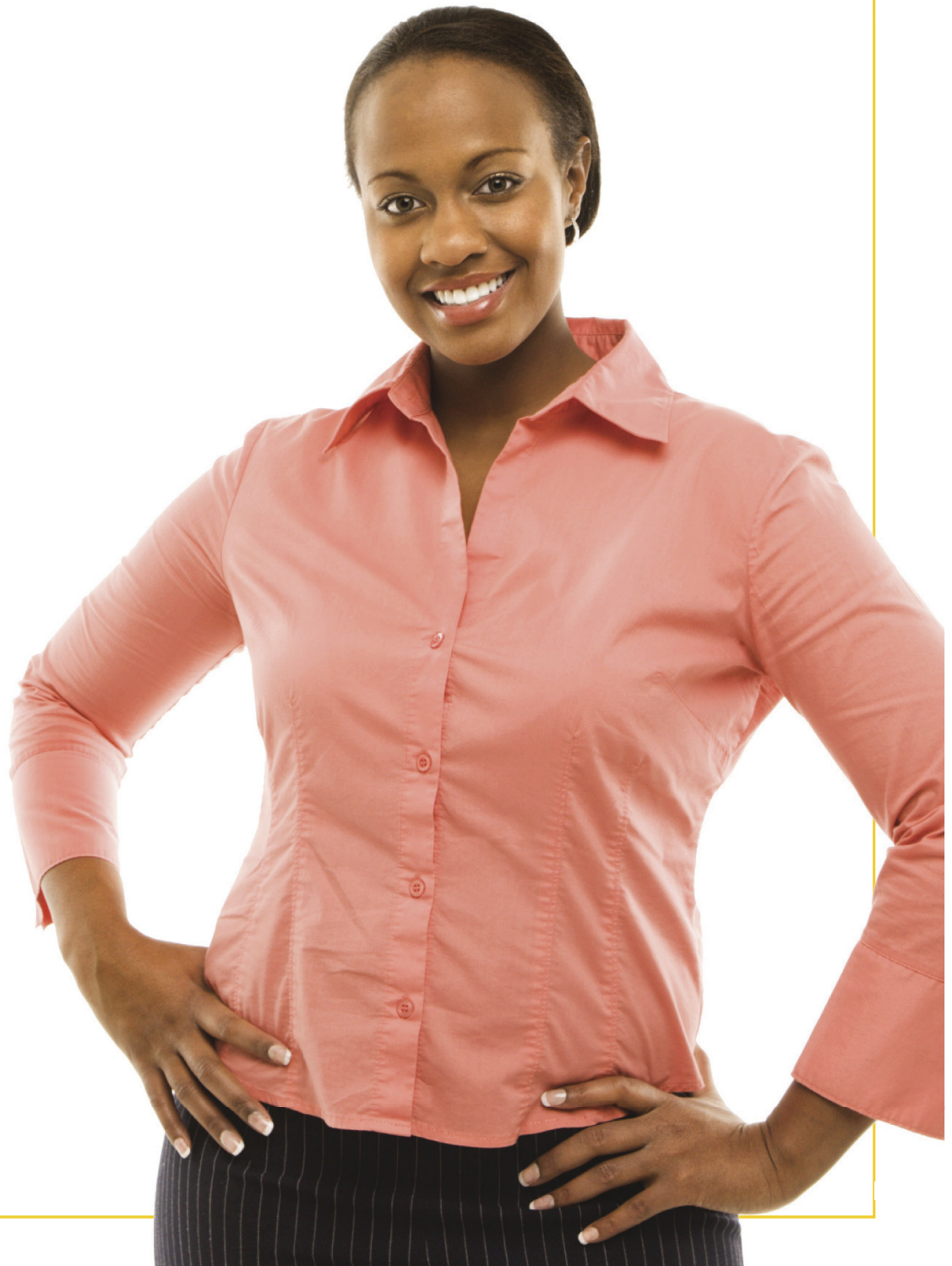
Failure to report these changes may constitute fraud. Some examples of fraud may result in the Utah Department of Health contacting you to recover money spent on your care when you were not eligible for the program.

My eligibility worker: _____

**Call your eligibility
worker to report
any changes.**

COVERED SERVICES

This section explains the basic services that PCN covers.



Visits to Provider
\$5 co-pay

Visits to a Primary Care Provider

Most services you receive from a primary care provider in his/her office during regular office hours are covered. The definition of a primary care provider is on page 8.

A provider will help if you need:

- Physical exam
- Medical advice or general health education
- Immunizations
- Screenings
- General preventive services

You will need to pay the co-pay for the office visit and also a co-pay for services like flu shots, screenings, etc. The following places also give limited PCN covered services:

- Public/county health department (see page 28)
- Rural health clinic
- Community health centers (see page 28)

More information. Specialty services received by a primary care provider may not be covered. Call 1-800-662-9651 (Medicaid Information Line) to learn if the service you need is covered. PCN does not cover services at an urgent care clinic (see page 17).

Dental Services
10% of allowed amount

Dental Services

Covered services are limited to:

- Routine check-ups every six (6) months (includes cleaning and x-rays)
- Resin fillings (tooth colored) for front teeth and silver amalgam for back teeth
- Some tooth extractions
- Emergency examination

More information. Call 1-888-222-2542 (Health Resource Line) or visit the web page at www.health.utah.gov/pcn/find.html to find a PCN provider and dentist near you.

Prescriptions

You may get **up to four (4) prescriptions per month** from the pharmacy. Over-the-counter (OTC) diabetes supplies (test strips, lancets and syringes) do not count as one of the four prescriptions. However, insulin does count. If a generic drug is not available, the name brand drug will be covered and you will pay the name brand co-pay amount. These are the co-pays for prescriptions:

Generic drugs	\$5
Over-the-counter drugs	\$5
Name brand drugs	25% of allowed amount

More information. First, ask your pharmacist for the drug name, strength and “NDC” code. Then, call 1-800-662-9651 (Medicaid Information Line), press 2, then 5 to ask if a certain drug is covered. Over-the-counter (OTC) drugs are covered only if they are on the PCN OTC list, but you must get a written prescription for it first. Then, you may buy it at the pharmacy.

Immunizations

PCN covers these adult immunizations:

- Chicken pox (Varicella)
- Flu (Influenza)
- Hepatitis A
- Hepatitis B
- Hepatitis A & B combined
- Lyme disease
- MMR
- Pneumonia
- Tetanus
- Tetanus & diphtheria
- Rabies

More information. Call 1-888-222-2542 (Health Resource Line).

Generic

\$5 co-pay

Over-the-Counter

\$5 co-pay

Name Brand

25% of allowed amount

Immunizations

\$5 co-pay

Screenings
co-pay will vary

Screenings

Get regular screenings from your primary care provider to catch health problems early. Some covered screenings include:

- Cholesterol test
- Mammogram
- Pap smear
- Skin cancer exam

More information. Call 1-800-662-9651 (Medicaid Information Line) to learn more about which screenings are covered.

Eye Exam
\$5 co-pay

Eye Exam

PCN will pay for:

- Eye exam (one exam per year)

An optometrist or ophthalmologist, as well as a primary care provider, may give you the eye exam. Before making an appointment, make sure the provider accepts PCN. Eyeglasses, contact lenses, or other vision services are not covered.

More information. Call 1-800-662-9651 (Medicaid Information Line) to learn more.

Lab Services
5% of allowed
amount if over \$50

Lab Services and X-Rays

Some x-rays related to an injury are covered. Some routine lab services you can get are:

- Chemistry panel (includes the blood glucose level)
- Blood cell count to check for anemia
- Culture, blood or urine test to check for diseases

X-Rays
5% of allowed
amount if over \$100

(continued)

MRI's, CT Scans and DEXA Scans are not covered. Tests like genetic testing, etc. are not covered. Ask your provider which tests are covered.

More information. Call 1-800-662-9651 (Medicaid Information Line) to learn more.

Diabetes Products

PCN covers some supplies to help you manage your diabetes:

- Insulin (only 10 cc. vials) - counts as one of the four prescriptions
- Lancets
- Test Strips
- Syringes

All brands of lancets, test strips and syringes are covered. They do not count as one of your four prescriptions per month (insulin does count). You will still need to get a prescription from your doctor to get the over-the-counter lancets, test strips and syringes.

Also, PCN may be able to pay for diabetes self-management classes. See your primary care provider for information and a referral.

More information. Call 1-800-662-9651 (Medicaid Information Line) to learn which kinds of insulin are covered.

Diabetes Products

\$5 co-pay

Birth Control

\$5 co-pay

Birth Control

Some birth control options are covered. Talk about these options with your provider. A prescription for birth control is counted as one of your four prescriptions per month.

PCN covers:

- IUD
- Condoms
- Diaphragm
- Birth control pills -- generic only (\$0 co-pay)

More information. Call 1-800-662-9651 (Medicaid Information Line) to learn which brands or other methods of birth control are covered. Vasectomies, tubal ligations, or other pregnancy related services are not covered. If you become pregnant, call your eligibility worker. There may be other options to cover you.

Medical Equipment and Supplies

10% for covered services over \$50

Medical Equipment and Supplies

There are many kinds of medical equipment and supplies that may be covered by PCN.

More information. Call 1-800-662-9651 (Medicaid Information Line) to learn more about which equipment and supplies are covered.

Emergency Care

For medical emergencies only, PCN will cover:

- Ambulance ride

But, PCN may not always cover the following:

- Emergency Room (ER) visit
- Visit with an ER provider

If you feel you are having a life-threatening medical emergency, PCN will cover an ambulance ride (ground or air) to the nearest hospital. But, in order for PCN to pay for the ER visit and visit with ER provider, the final diagnosis must be an “approved” medical emergency. Even if your primary care provider tells you to go to the ER, the final diagnosis must still be approved by PCN.

Many people ask how PCN decides if their emergency care will be approved and covered. First, the hospital will decide your diagnosis (what is wrong with you) and the type of emergency. Second, the hospital will give the diagnosis a billing code. If that billing code is not on the PCN list of approved emergencies (Authorized Diagnoses for Emergency Department), then **you must pay for the emergency care.**

PCN does **not** cover MRI’s or CT Scans even if it is during an approved ER visit. Also, if a specialist is called into the ER to visit you, that service will not be covered. For example, if you have an injury and you were seen by an orthopedic specialist along with the ER doctor, then you must pay for the orthopedic specialist.

Urgent care clinic services (like InstaCare) are **not** covered by PCN. You may go to your provider after hours, but if your provider bills the service as “urgent care”, then you must pay for the service.

More information. Call 1-800-662-9651 (Medicaid Information Line) to learn more about which emergency care services are covered and approved.

Ambulance

\$0 co-pay

Approved ER Visit

\$30 co-pay

Notes

INPATIENT HOSPITAL & SPECIALTY CARE

This section explains how PCN may be able to help you get the care you need.



Inpatient Hospital & Specialty Care

PCN does not cover inpatient hospital or specialty care. However, PCN is committed to finding and arranging specialized care for you when possible. Be aware that you may have to pay for these services. In some cases, free or discounted services may be available.

Inpatient Hospital. PCN does not pay for inpatient hospital services such as inpatient surgery or hospital stays. If you need to stay in the hospital for more than 24 hours, please contact the billing department at the hospital where you will be receiving services. The billing department will help you in the financial assistance process at that hospital. Each hospital is responsible for determining your eligibility for their charity care program. They will determine whether or not you will be billed for inpatient services you receive at their facility.

See page 22 for a list of numbers for each hospital.

Specialty Care. PCN does not pay for specialty care services such as cardiology, gastroenterology, neurology, nephrology, urology, etc. If you need to see a specialist, you must first get a referral from your primary care provider. (Referrals for emergency care are not accepted.) Then, the Specialty Care Coordinator will try to find these services for you. Again, please know you may have to pay for these services.

Only a provider can give a referral for specialty care. When sending a referral to PCN, **your provider must complete the following steps:**

1. Write a referral for the specialist or outpatient services. (Phone referrals are never accepted.)

(continued)

2. Include this information on the referral:

- Patient's date of birth
- PCN ID#
- Diagnosis
- Procedure or specialty care requested

3. Fax the referral to: 801-474-3804

Depending on the type of specialty care your provider requests, it may take 4-8 weeks or more to arrange specialty care services.

Specialty Care

801-538-6359

801-538-6265

Fax the Referral

fax: 801-474-3804

Contact Information for Inpatient Hospital Services

BEAVER COUNTY

Beaver Valley Hospital
P.O. Box 1670
Beaver, UT 84713-1670
Phone: (435) 438-7151
Fax: (435) 438-7166
eyardley@beaverhospital.net

Milford Valley Memorial Hospital
P.O. Box 640
Milford, UT 84751-0640
Phone: (435) 387-2411
mjohnson@milfordhospital.net

BOX ELDER COUNTY

Bear River Valley Hospital
440 West 600 North
Tremonton, UT 84337-2400
Phone: (435) 257-7441
locranda@ihc.com

Brigham City Community Hospital
950 South Medical Drive
Brigham City, UT 84302-3090
Phone: (435) 734-9471
Fax: (435) 723-5085
richard.spuhler@mountainstarhealth.com

CARBON COUNTY

Castlevue Hospital
300 North Hospital Drive
Price, UT 84501-4218
Phone: (435) 637-4800 ext: 4109
renai.campbell@lifepointhospitals.com

DAVIS COUNTY

Benchmark Behavioral Health Systems North
592 West 1350 South
Woods Cross, UT 84010-8180
Phone: (801) 299-5300
Fax: (801) 296-2163
barry.woodward@psysolutions.com

Lakeview Hospital
630 East Medical Drive
Bountiful, UT 84010-4908
Phone: (801) 299-2501
Fax: (801) 299-2534
wayne.dalton@mountainstarhealth.com

DUCHESNE COUNTY

Uintah Basin Medical Center
250 West 300 North
Roosevelt, UT 84066-2336
Phone: (435) 722-6107
Fax: (435) 722-6155
sdurfey@ubmc.org

GARFIELD COUNTY

Garfield Memorial Hospital
P.O. Box 389
Panguitch, UT 84759-0389
Phone: (435) 676-8811
Fax: (435) 676-2679
alberto.vasquez@intermountainmail.org

IRON COUNTY

Valley View Medical Center
1303 North Main Street

Cedar City, UT 84720-9746
Phone: (435) 868-5611
Fax: (435) 868-5052
merilyn.pryor@intermountainmail.org

JUAB COUNTY

Central Valley Medical Center
P.O. Box 412
Nephi, UT 84648-0412
Phone: (435) 623-3111
Fax: (435) 623-3290
bdavis@cvmed.net

KANE COUNTY

Kane County Hospital
355 North Main Street
Kanab, UT 84741-3260
Phone: (435) 644-4157
Fax: (435) 644-4141
howells@xpressweb.com

MILLARD COUNTY

Delta/Fillmore Community Medical
674 South Highway 99
Fillmore, UT 84631-5013
Phone: (435) 743-5591
Fax: (435) 743-6312
jackie.rhinehart@intermountainmail.org

SALT LAKE COUNTY

Intermountain Urban Central Region
8th Avenue & "C" Street
Salt Lake City, UT 84143-0001
Phone: (801) 408-1171
Fax: (801) 408-1665
dave.larsen@intermountainmail.org

Jordan Valley Hospital
3580 West 9000 South
West Jordan, UT 84088-8812
Phone: (801) 562-4214
Fax: (801) 569-8723
bcluff@iasishealthcare.com

Pioneer Valley Hospital
3460 South Pioneer Parkway
West Valley, UT 84120-2049
Phone: (801) 964-3104
Fax: (801) 964-3247
jspackman@iasishealthcare.com

Salt Lake Regional Medical
1050 East South Temple
Salt Lake City, UT 84102-1507
Phone: (801) 350-4993
Fax: (801) 350-4522
spayne@iasishealthcare.com

Shriners Hospital for Children
Fairfax Road at Virginia Street
Salt Lake City, UT 84103-4399
Phone: (801) 536-3500
rlindberg@shrinenet.org

St. Mark's Hospital
1200 East 3900 South
Salt Lake City, UT 84124-1390
Phone: (801) 268-7133
Fax: (801) 270-3331
brian.mcminn@hcahealthcare.com

University Health Care
50 North Medical Drive

Salt Lake City, UT 84132-0012
Phone: (801) 581-2374 or
Phone: (801) 581-5678

SAN JUAN COUNTY

San Juan Hospital/Health Services
P.O. Box 308
Monticello, UT 84535-0308
Phone: (435) 587-2116
Fax: (435) 587-3004
lduncan@sanjuanhospital.org

SANPETE COUNTY

Gunnison Valley Hospital
P.O. Box 759
Gunnison, UT 84634-0759
Phone: (435) 528-2146
Fax: (435) 528-2197
brianm@gvhospital.org

Sanpete Valley Hospital
1100 South Medical Drive
Mt. Pleasant, UT 84647-2222
Phone: (435) 462-2441
stephanie.murphy@intermountainmail.org

SEVIER COUNTY

Sevier Valley Medical Center
1000 North Main Street
Richfield, UT 84701-1857
Phone: (435) 893-0270
Fax: (435) 893-0385
julie.anderson@ihc.com

TOOELE COUNTY

Mountain West Medical Center
2055 North Main Street

Tooele, UT 84074-9819
Phone: (435) 843-3710
Fax: (435) 843-3637
sheila.o'driscoll@chs.net

UNITAH COUNTY

Ashley Valley Medical Center
151 West 200 North
Vernal, UT 84078-1907
Phone: (435) 789-3342 ext 167
Fax: (435) 789-6502
mandy.hudson@lpnt.net

UTAH COUNTY

American Fork Hospital
170 North 1100 East
American Fork, UT 84003-2096
Phone: (801) 855-3520
Fax: (801) 855-3586
robert.toone@intermountainmail.org

Intermountain Urban South Region
1134 North 500 West, Ste 201
Provo, UT 84604-6104
Phone: (801) 357-7486
john.mcbride@intermountainmail.org

Mountain View Hospital
1000 East 100 North
Payson, UT 84651-1600
Phone: (801) 465-7000
jerryann.lance@mountainstarhealth.com

Utah Valley Specialty Hospital
306 West River Bend Lane
Provo, UT 84604-5625
Phone: (801) 226-5846

Fax: (801) 226-8890
marieprothero@ernesthealth.com

WASATCH COUNTY

Heber Valley Medical Center
1485 South Highway 40
Heber City, UT 84032-3522
Phone: (435) 654-2500
hvllyons@ihc.com

WASHINGTON COUNTY

Dixie Regional Medical Center
1380 East Medical Center Drive
St. George, UT 84790-2122
Phone: (435) 251-2104
Fax: (435) 251-2115
terri.kane@intermountainmail.org

WEBER COUNTY

McKay-Dee Hospital Center
4401 Harrison Blvd.
Ogden, UT 84403-3195
Phone: (801) 387-7655
david.ferrin@intermountainmail.org

Ogden Regional Medical Center
5475 South 500 East
Ogden, UT 84405-6905
Phone: (801) 479-2613
john.mcfarland@mountainstarhealth.com

Notes

PCN Member Guide

RESOURCES A-Z

These are some helpful phone numbers of community resources.



Resources A-Z

Emergency	9-1-1
General Information	2-1-1
Medicaid Information Line	1-800-662-9651
UDOH Health Resource Line	1-888-222-2542
Bureau of Eligibility Services	1-800-310-6949

Community Health Centers (CHC)

Bear Lake CHC.	435-946-3660
325 W. Logan Hwy, Ste. #3, Garden City	
Blanding Family Practice	435-678-3601
799 S. 200 W., Blanding	
Carbon Medical Service Assoc.....	435-888-4411
305 Center St., East Carbon	
Central City CHC.	801-539-8634
461 S. 400 E., Salt Lake City	
Copperview CHC	801-566-5494
8446 S. Harrison Blvd, Midvale	
Enterprise Valley Medical Clinic.	435-878-2281
223 S. 200 E., Enterprise	
Fourth Street Clinic (Wasatch).	801-364-0058
404 S. 400 W., Salt Lake City	
Green River Medical Center	435-564-3434
305 W. Main Street, Green River	
Helper Clinic	435-472-7000
125 S. Main, Helper	
Indian Walk-In Center	801-486-4877
120 W. 1300 S., Salt Lake City	
Midtown CHC	801-393-5355
670 28th St., Ogden	
Montezuma Creek Clinic	435-651-3291
East Highway 262, Montezuma Creek	
Monument Valley Clinic	435-727-3241
4 Rock Door Canyon Rd., Monument Valley	
Mountainlands CHC	801-374-9660
215 W. 100 N., Provo	
Navajo Mountain Clinic	928-672-2494
#2 Rainbow Rd, Navajo Mountain	

Community Health Centers (CHC) cont'd

Oquirrh View CHC	801-964-6214
4745 S. 3200 W., Salt Lake City	
Payson Family Health Center	801-465-1890
910 E. 100 N., Suite 155, Payson	
Stephen D. Ratcliffe CHC	801-328-5750
1365 W. 1000 N., Salt Lake City	
Southwest Utah CHC	435-986-2565
168 N. 100 E., St. George	
Utah Farm Worker Health Clinic.	435-723-8276
14 N. 100 E. #2, Brigham City	
Wasatch Homeless Health Care.	801-364-0058
404 S. 400 W., Salt Lake City	
Wayne CHC	435-425-3744
128 S. 300 W., Bicknell	

Health Clinics of Utah

Health Clinic of Utah.	801-468-0354
3195 South Main, Suite 200, Salt Lake City	
Health Clinic of Utah.	801-374-7011
150 East Center St., Suite 1100, Provo	
Health Clinic of Utah.	801-626-3670
2540 Washington Blvd. Suite 122, Ogden	

Health Insurance Programs

CHIP (Children’s Health Insurance Program)	
(1-877-KIDS-NOW) 1-877-543-7669	
Medicaid Information Line	1-800-662-9651
Primary Care Network	1-888-222-2542
Utah Comprehensive Health Insurance Pool	
(HIP)1-800-705-9173	
UPP for Health Insurance	1-888-222-2542

Local Health Departments

Bear River Health Dept.	435-792-6500
655 E 1300 N, Logan	
Central Utah Health Dept.	435-896-5451
70 Westview Dr., Richfield	

Local Health Departments cont'd

Davis County Health Dept. 801-451-3340
 Courthouse Annex, 50 E State St, Farmington

Salt Lake Valley Health Dept. . . 801-468-2700
 2001 S State Street #S-2400, Salt Lake City

Southeastern Utah Health Dept. .435-637-3671
 28 S 1st E, Price

Southwest Utah Health Dept . . .435-673-3528
 168 N 100 E, St. George

Summit County Health Dept. . . .435-336-3222
 85 N 50 E, Coalville

Tooele County Health Dept 435-843-2300
 151 N Main St, Tooele

TriCounty Health Dept435-781-5475
 147 E Main St, Vernal

Utah County Health Dept.801-851-7000
 151 S University Ave, Provo

Wasatch County Health Dept . . .435-654-2700
 55 S 500 E, Heber City

Weber-Morgan Health Dept801-399-7100
 477 23rd St., Ogden

Other

Prescription Drug Assistance

RxConnect Utah1-866-221-0265

State Health Department

Utah Department of Health801-538-6101
 288 N. 1460 W., Salt Lake City

Tribal/Indian Health Services Offices

Confederated Tribes of Goshute Indian
 Reservation.435-234-1157

Fort Duchesne Indian Health Services
 Clinic.435-722-5122

Northwest Band of Shoshone. . . 435-734-2286

Paiute Indian Tribe of Utah 435-586-1112

Ute Mountain Ute Tribal Health
 Center. 970-565-4441 x.247

Utah Department of Health, Division of Health Care Financing

Notice of Privacy Rights

This notice describes how medical information about you may be used and disclosed and how you may access this information. Please review it carefully. Effective: 04/14/2003

The Utah Department of Health, Division of Health Care Financing (DHCF) is committed to protecting your medical information. DHCF is required by law to maintain the privacy of your medical information, provide this notice to you, and abide by the terms of this notice.

Confidentiality Practices and Uses

DHCF may use your health information for conducting our business. Examples:

Treatment - to appropriately determine approvals or denials of your medical treatment. For example, DHCF health care professionals may review your treatment plan by your health care provider for medical necessity if a Medicaid recipient or for program listed services if a Primary Care Network (PCN) recipient, Children's Health Insurance Program (CHIP) recipient or Utah's Premium Partnership for Health Insurance (UPP) enrollee.

Payment - to determine your eligibility in the Medicaid, PCN, CHIP, or UPP program and make payment to your health care provider. For example, your health care provider may send claims for payment to DHCF for medical services provided to you, if appropriate.

Health Care Operations - to evaluate the performance of a health plan or a health care provider. For example, DHCF contracts with consultants who review the records of hospitals and other organizations to determine the quality of care you received.

Informational Purposes - to give you helpful information such as health plan choices, program benefit updates, free medical exams and consumer protection information.

Your Individual Rights

You have the right to:

Request restrictions on how we use and share your health information. We will consider all requests for restrictions carefully but are not required to agree to any restriction.

Request that we use a specific telephone number or address to communicate with you.

Inspect and copy your health information, including medical and billing records. Fees may apply. Under limited circumstances, we may deny you access to a portion of your health information and you may request a review of the denial.*

Request corrections or additions to your health information.*

Request an accounting of certain disclosures of your health information made by us. The accounting does not include disclosures made for treatment, payment, and health care operations and some disclosures required by law. Your request must state the period of time desired for the accounting, which must be within the six years prior to your request and exclude dates prior to April 14, 2003. The first accounting is free but a fee will apply if more than one request is made in a 12 month period.*

Request a paper copy of this notice even if you agree to receive it electronically.

*Must be made in writing. Contact the DHCF Privacy Officer for the appropriate form for your request.

Sharing Your Health Information

There are limited situations when we are permitted or required to disclose health information without your signed authorization. These situations include activities necessary to administer the Medicaid, PCN, CHIP and UPP programs and the following:

For public health purposes such as reporting communicable diseases, work-related illnesses, or other diseases and injuries permitted by law; reporting births and deaths; and reporting reactions to drugs and problems with medical devices.

To protect victims of abuse, neglect, or domestic violence.

For health oversight activities such as investigations, audits, and inspections.

For lawsuits and similar proceedings.

When otherwise required by law.

When requested by law enforcement as required by law or court order.

To coroners, medical examiners, and funeral directors.

For organ and tissue donation.

For research approved by our review process under strict federal guidelines.

To reduce or prevent a serious threat to public health and safety.

For workers' compensation or other similar programs if you are injured at work.

For specialized government functions such as intelligence and national security.

All other uses and disclosures, not described in this notice, require your signed authorization. You may revoke your authorization at any time with a written statement.

Our Privacy Responsibilities

DHCF is required by law to:

Maintain the privacy of your health information.

Provide this notice that describes the ways we may use and share your health information.

Follow the terms of the notice currently in effect.

We reserve the right to make changes to this notice at any time and make the new privacy practices effective for all information we maintain. Current notices will be posted in DHCF offices and on our website at www.health.utah.gov/hipaa. You may also request a copy of any notice from your DHCF Privacy Officer listed below.

Contact Us

If you would like further information about your privacy rights, are concerned that your privacy rights have been violated, or disagree with a decision that we made about access to your health information, Medicaid, PCN, CHIP and UPP recipients should contact the DHCF Privacy Officer, Craig Devashrayee, 801-538-6641; 288 North 1460 West, 3rd Floor; PO Box 143102, Salt Lake City, Utah 84114-3102; cdevashrayee@utah.gov.

We will investigate all complaints and will not retaliate against you for filing a complaint. You may also file a written complaint with the Office of Civil Rights, 200 Independence Avenue, S.W. Room 509F HHH Bldg., Washington, DC 20201.



Primary Care Network

Information in the PCN Member Guide may change without notice. This guide contains a brief description of coverage and is not a policy, coverage or service agreement. A detailed description of coverage is available online in the PCN Provider Manual at www.health.utah.gov/medicaid/tree in the folder “Primary Care Network (PCN)”.

Primary Care Network

PO Box 144102

Salt Lake City, UT 84114-4102

PRSRT STD

U.S. POSTAGE

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SALT LAKE CITY, UT

PERMIT NO. 4621

PCN

Primary Care Network